

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)USE FEC MAILING LABEL  
OR TYPE OR PRINT ▼Example: If typing, type  
over the lines

Cicilline Committee

ADDRESS (number and street)  
▼

102 Waterman St

☐Check if different  
than previously  
reported. (ACC)

Providence

RI

02906

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00476564

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

RI

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☒

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☐

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the  
State of

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

01

01

2011

through

03

31

2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Nancy Benoit

Signature of Treasurer

Electronically Filed by Nancy Benoit

Date

04

15

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

**SUMMARY PAGE**

of Receipts and Disbursements

**2 / 88**

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Cicilline Committee

Report Covering the Period:

From:

M M  
0 1D D  
0 1Y Y Y Y  
2 0 1 1

To:

M M  
0 3D D  
3 1Y Y Y Y  
2 0 1 1

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	124346.10	166426.05
(b) Total Contribution Refunds (from Line 20(d)).....	200.00	1200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	124146.10	165226.05
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	93608.55	180400.88
(b) Total Offsets to Operating Expenditures (from Line 14).....	13269.98	13269.98
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	80338.57	167130.90
8. Cash on Hand at Close of Reporting Period (from Line 27).....	77930.74	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	89000.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-694-1100

## DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name  
Cicilline Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	1	1

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	1	1

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	82406.15	89956.15
(i) Itemized (use Schedule A).....	4605.00	6110.00
(ii) Unitemized.....	87011.15	96066.15
(iii) TOTAL of contributions from individuals..... ▶	13.68	13.68
(b) Political Party Committees.....	37321.27	70346.22
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	124346.10	166426.05
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))		
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	1733.95
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	13269.98	13269.98
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	137616.08	181429.98

# DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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## II. DISBURSEMENTS

### COLUMN A Total This Period

### COLUMN B Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	93608.55	180400.88
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	200.00	200.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	200.00	1200.00
21. OTHER DISBURSEMENTS.....	3439.00	3439.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ➤	97247.55	185039.88

## III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	37562.21
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	137616.08
25. SUBTOTAL (add Line 23 and Line 24).....	175178.29
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	97247.55
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	77930.74

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Rita Afonso

Mailing Address 51 Rawson Road

City

Cumberland

State

RI

Zip Code

02864

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 1 / 2 0 1 1

Transaction ID: C4713399

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Andrew J. Annaldo

Mailing Address 2 Beloit Street

City

Providence

State

RI

Zip Code

02908

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Andrew Annaldo & Associat-  
es

Occupation

President

Receipt For: 2010

☐ Primary ☐ General  
☒ Other (specify) ▼  
2010 Gen. Debt

Election Cycle-to-Date ▼

1408.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 6 / 2 0 1 1

Transaction ID: C4713795

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Andrew J. Annaldo

Mailing Address 2 Beloit Street

City

Providence

State

RI

Zip Code

02908

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Andrew Annaldo & Associat-  
es

Occupation

President

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1408.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 8 / 2 0 1 1

Transaction ID: C4755619

Amount of Each Receipt this Period

658.00

\* In-Kind: Fundraising Ex-  
pense: Catering

**SUBTOTAL** of Receipts This Page (optional) .....

1158.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Andrew J. Annaldo

Mailing Address 2 Beloit Street

City

Providence

State

RI

Zip Code

02908

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Andrew Annaldo & Associat-  
es

Occupation  
President

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1408.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 0 / 2 0 1 1

Transaction ID: C4754574

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Samuel Ashner

Mailing Address 175 Blossom St  
Unit 1402

City

Boston

State

MA

Zip Code

02114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Winthrop Realty Trust

Occupation  
Asset Manager

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: C4755175

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Richard L. Babson

Mailing Address 330 Beacon Street, Suite A161

City

Boston

State

MA

Zip Code

02116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BABSON-UNITED

Occupation  
BUSINESS EXECUTIVE

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 1 / 2 0 1 1

Transaction ID: C4713398

Amount of Each Receipt this Period

350.00

**SUBTOTAL** of Receipts This Page (optional) .....

1100.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Thomas Badway

Mailing Address P.O. Box 6426

City

Providence

State

RI

Zip Code

02940

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Thomas E. Badway & Associ-  
ates, LLC

Occupation

Attorney

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	7		2	0	1	1

Transaction ID: C4713183

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Robert L. Beal

Mailing Address 177 Milk St.

City

Boston

State

MA

Zip Code

02109

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Beal Companies

Occupation

Partner and President

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	1	1

Transaction ID: C4751310

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

John B. Bentz

Mailing Address 1 Fair Oaks Ct. South

City

Greenville

State

RI

Zip Code

02828

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Property Advisory Group

Occupation

President

Receipt For: 2010

☐ Primary ☐ General  
☒ Other (specify) ▼  
 2010 Gen. Debt

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	1	1

Transaction ID: C4713799

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) .....

2000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Joseph R. Beretta

Mailing Address 50 Grandview Ave

City

Lincoln

State

RI

Zip Code

02865-2903

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Robinson Green Beretta  
Corp.

Occupation

Vice President/ Architect

Receipt For: 2010

☐ Primary ☐ General

☒ Other (specify) ▼  
2010 Gen. Debt

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 5 / 2 0 1 1

Transaction ID: C4713832

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Paul M. Bernon

Mailing Address 61 Bristol Road

City

Wellesley

State

MA

Zip Code

02481

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rubicon Real Estate, LLC

Occupation

Real Estate Investor

Receipt For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: C4754854

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

Mark Bescher

Mailing Address 1300 N St NW  
Apt 106

City

Washington

State

DC

Zip Code

20005-3688

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Global Alliance for Impro-  
ved Nutrition

Occupation

Manager, Gov't Relations

Receipt For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 1 1

Transaction ID: C4751567

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Kimberly Bianco

Mailing Address 170 Gention Avenue

City

Providence

State

RI

Zip Code

02908

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
City of Providence School  
Department

Occupation

Information Requested

Receipt For: 2012

Election Cycle-to-Date ▼

☒ Primary ☐ General  
☐ Other (specify) ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 1 1

Transaction ID: C4754593

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

David Bohnett

Mailing Address The David Bohnett Foundation  
245 South Beverly Drive

City

Beverly Hills

State

CA

Zip Code

90212

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The David Bohnett Foundat-  
ion

Occupation

Chairman

Receipt For: 2012

Election Cycle-to-Date ▼

☒ Primary ☐ General  
☐ Other (specify) ▼

4900.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 1 / 2 0 1 1

Transaction ID: C4749848

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

David Bower

Mailing Address 719 North Carolina Avenue SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Weil, Gotchal & Manges

Occupation

Attorney

Receipt For: 2012

Election Cycle-to-Date ▼

☒ Primary ☐ General  
☐ Other (specify) ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 9 / 2 0 1 1

Transaction ID: C4755517

Amount of Each Receipt this Period

1500.00

**SUBTOTAL** of Receipts This Page (optional) .....

4250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Deborah M. Brayton

Mailing Address 127 Tenth St.

City

Providence

State

RI

Zip Code

02906-2921

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Unemployed

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 0 4 / 2 0 1 1

Transaction ID: C4712970

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Deborah M. Brayton

Mailing Address 127 Tenth St.

City

Providence

State

RI

Zip Code

02906-2921

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Unemployed

Receipt For: 2010

☐ Primary ☐ General  
☒ Other (specify) ▼  
2010 Gen. Debt

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 0 4 / 2 0 1 1

Transaction ID: C4712971

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Brian Breheny

Mailing Address 1401 17th Street NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Skadden Arps

Occupation

Lawyer

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 3 / 2 0 1 1

Transaction ID: C4751559

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 88

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Milton H. Bronstein

Mailing Address 34 Bennington Road

City

Cranston

State

RI

Zip Code

02920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Retired

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	4		2	0	1	1

Transaction ID: C4712963

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Milton H. Bronstein

Mailing Address 34 Bennington Road

City

Cranston

State

RI

Zip Code

02920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Retired

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	1

Transaction ID: C4755183

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Norman Brownstein

Mailing Address 22nd Floor, 410 17th St

City

Denver

State

CO

Zip Code

80202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Brownstein, Hyatt, and Fa-  
rber

Occupation

Attorney

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	1

Transaction ID: C4755178

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) .....

1000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

A.

Full Name (Last, First, Middle Initial)

Charles CJ Carpenter

Mailing Address 12 Half Mile Rd

City

Barrington

State

RI

Zip Code

02806

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Brown UniversityOccupation  
Physician

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: C4755185

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

James L. Carr, Jr.

Mailing Address 100 Royal Little Drive

City

Providence

State

RI

Zip Code

02904

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
H. Carr & SonsOccupation  
CEO/ President

Receipt For: 2010

☐ Primary ☐ General  
☒ Other (specify) ▼  
2010 Gen. Debt

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 5 / 2 0 1 1

Transaction ID: C4713805

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

John S. Carter

Mailing Address 137 Grotto Avenue

City

Providence

State

RI

Zip Code

02906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 0 4 / 2 0 1 1

Transaction ID: C4712973

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional) .....

1750.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

John S. Carter

Mailing Address 137 Grotto Avenue

City

Providence

State

RI

Zip Code

02906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	1	1

Transaction ID: C4754500

Amount of Each Receipt this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)

John S. Carter

Mailing Address 137 Grotto Avenue

City

Providence

State

RI

Zip Code

02906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	1	1

Transaction ID: C4754502

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Letitia M. Carter

Mailing Address 137 Grotto Avenue

City

Providence

State

RI

Zip Code

02906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	4		2	0	1	1

Transaction ID: C4712974

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional) .....

3500.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Letitia M. Carter

Mailing Address 137 Grotto Avenue

City

Providence

State

RI

Zip Code

02906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	1	1

Transaction ID: C4754489

Amount of Each Receipt this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)

Letitia M. Carter

Mailing Address 137 Grotto Avenue

City

Providence

State

RI

Zip Code

02906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	1	1

Transaction ID: C4754496

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Steven M Champlin

Mailing Address 4800 Dexter St NW

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Duberstein Group

Occupation

Senior Vice President

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	3		2	0	1	1

Transaction ID: C4746838

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional) .....

3500.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 88

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Alan J. Chille

Mailing Address 24 Rogler Farm Road

City

Smithfield

State

RI

Zip Code

02917

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Providence Performing Arts  
Center

Occupation

General Manager

Receipt For: 2010

☐ Primary ☐ General☒ Other (specify) ▼  
2010 Gen. Debt

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	1	1

Transaction ID: C4713811

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Paul J. Choquette, Jr.

Mailing Address 57 Old Forge Road

City

East Greenwich

State

RI

Zip Code

02818-4602

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gilbane Building Company

Occupation

CEO

Receipt For: 2010

☐ Primary ☐ General☒ Other (specify) ▼  
2010 Gen. Debt

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	1	1

Transaction ID: C4713814

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Robert Cogorno

Mailing Address 1715 Riggs PI NW

City

Washington

State

DC

Zip Code

20009-6114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Elmendorf Strategies

Occupation

Consultant

Receipt For: 2012

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	1	1

Transaction ID: C4751558

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

750.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Thomas N. Comella

Mailing Address 6 Apple Blossom Drive

City

Johnston

State

RI

Zip Code

02919

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gilbane Co

Occupation

Vice President of Construction

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: C4755174

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Denise Dangremond

Mailing Address 47 Nayatt Rd

City

Barrington

State

RI

Zip Code

02806-3317

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation

Career Consultants

Receipt For: 2010

☐ Primary ☐ General  
☒ Other (specify) ▼  
2010 Gen. Debt

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 5 / 2 0 1 1

Transaction ID: C4713797

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

David Dasecco

Mailing Address 549 Borden Ave Apt 7G

City

Long Island

State

NY

Zip Code

11101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hofstra University

Occupation

Communications

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: C4755514

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Anne S. De Groot, M.D.

Mailing Address 292 Morris Avenue

City

Providence

State

RI

Zip Code

02906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EpiVax Incorporated

Occupation  
CEO

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 5 / 2 0 1 1

Transaction ID: C4713480

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

James V. DeRentis

Mailing Address 89 Angell St.

City

Providence

State

RI

Zip Code

02906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Residential Properties LTD

Occupation  
Realtor

Receipt For: 2010

☐ Primary ☐ General  
☒ Other (specify) ▼  
2010 Gen. Debt

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 5 / 2 0 1 1

Transaction ID: C4713806

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Todd Dickinson

Mailing Address 3245 Nebraska Ave. NW

City

Washington

State

DC

Zip Code

20016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AIPLA

Occupation  
Executive Director

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 3 / 2 0 1 1

Transaction ID: C4746839

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Bradford S. Dimeo

Mailing Address 140 Nayatt Rd

City

Barrington

State

RI

Zip Code

02806-3335

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dimeo Construction

Occupation  
President

Receipt For: 2010

☐ Primary ☐ General  
☒ Other (specify) ▼  
 2010 Gen. Debt

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 2 0 / 2 0 1 1

Transaction ID: C4714347

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Clay Doherty

Mailing Address 1499 Massachusetts Avenue  
 #913

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 1 / 2 0 1 1

Transaction ID: C4749844

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

Barbara J. Dreyer

Mailing Address 254 Wayland Avenue #4

City

Providence

State

RI

Zip Code

02906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Capital Properties, Incorporated

Occupation  
TREASURER

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 0 / 2 0 1 1

Transaction ID: C4754530

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Ruth Eisenberg

Mailing Address 1720 Euclid St. NW

City

Washington

State

DC

Zip Code

20009

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Harmon, Curran, Spielberg  
& Eisenberg

Occupation

Lawyer

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	6	/	2	0	1	1

Transaction ID: C4746726

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Steve Elmendorf

Mailing Address 900 7th St NW  
Suite 750

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
President

Occupation

Elmendorf Ryan

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	8	/	2	0	1	1

Transaction ID: C4753629

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Constance F. Evrard

Mailing Address 10 Arnold St

City

Providence

State

RI

Zip Code

02906-1066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	1	/	2	0	1	1

Transaction ID: C4713393

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

750.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 88

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Constance F. Evrard

Mailing Address 10 Arnold St

City

Providence

State

RI

Zip Code

02906-1066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For: 2012

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	1	1

Transaction ID: C4751525

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Malcolm Farmer, III

Mailing Address 190 Upton Ave

City

Providence

State

RI

Zip Code

02906-5748

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hinckley Allan & Snyder,  
LLP

Occupation

Attorney

Receipt For: 2012

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	7	/	2	0	1	1

Transaction ID: C4713095

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Malcolm Farmer, III

Mailing Address 190 Upton Ave

City

Providence

State

RI

Zip Code

02906-5748

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hinckley Allan & Snyder,  
LLP

Occupation

Attorney

Receipt For: 2012

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	1

Transaction ID: C4755184

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) .....

850.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 88

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Louis A. Fazzano

Mailing Address 10 Barney St

City

Newport

State

RI

Zip Code

02840-2918

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Retired

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	1		2	0	1	1

Transaction ID: C4713394

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Louis A. Fazzano

Mailing Address 10 Barney St

City

Newport

State

RI

Zip Code

02840-2918

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Retired

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	1	1

Transaction ID: C4753358

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Eleanor J. Frank

Mailing Address 126 Hartshorn Road

City

Providence

State

RI

Zip Code

02906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	8		2	0	1	1

Transaction ID: C4752319

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) .....

850.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Robert L. Frome

Mailing Address 65 East 55th Street

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Olshan Grudman Frome Ros-  
enzweig & Wol

Occupation

Attorney

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: C4755181

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

William J. Gilbane, Jr.

Mailing Address 140 Adams Point Road

City

Barrington

State

RI

Zip Code

02806

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gilbane Building Company

Occupation

Builder

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 1 / 2 0 1 1

Transaction ID: C4713397

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

William J. Gilbane, III

Mailing Address 165 Charles Street

City

New York

State

NY

Zip Code

10014

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gilbane Inc

Occupation

Owner

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 3 / 2 0 1 1

Transaction ID: C4749747

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

3250.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

William J. Gilbane, Jr.

Mailing Address 140 Adams Point Road

City

Barrington

State

RI

Zip Code

02806

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gilbane Building CompanyOccupation  
Builder

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	1

Transaction ID: C4755173

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

John J. Gilroy, III

Mailing Address 1671 Kingtown Road

City

Peace Dale

State

RI

Zip Code

02879

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GilbaneOccupation  
Regional Support Operations Manager

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	1

Transaction ID: C4755172

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mark Glaze

Mailing Address 1736 19th St NW #3  
1640 Rhode Island Avenue, NW Suite

City

Washington

State

DC

Zip Code

20009

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Raben GroupOccupation  
Consultant

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	8	/	2	0	1	1

Transaction ID: C4746840

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional) .....

2500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

John Michael Gonzalez

Mailing Address 1882 Columbia Rd NW Apt 104

City

Washington

State

DC

Zip Code

20009

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PECK MADIGAN JONES

Occupation

CONSULTANT

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 9 / 2 0 1 1

Transaction ID: C4754347

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Justin Gray

Mailing Address 300 New Jersey Ave, NW, Suite 650

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GrayLoeffler, LLC

Occupation

President & CEO

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

224.07

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 7 / 2 0 1 1

Transaction ID: C4760822

Amount of Each Receipt this Period

224.07

\* In-Kind: Event Catering

**C.**

Full Name (Last, First, Middle Initial)

William Gray

Mailing Address 2730 Cardena St

City

Miami

State

FL

Zip Code

33134

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GrayLoeffler, LLC

Occupation

Co-Chairman

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

224.08

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 7 / 2 0 1 1

Transaction ID: C4760828

Amount of Each Receipt this Period

224.08

\* In-Kind: Event Catering

**SUBTOTAL** of Receipts This Page (optional) .....

1448.15

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Andrew F. Gurley

Mailing Address 1 Park Rd

City

Irvington

State

NY

Zip Code

10533-2008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

None

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	1		2	0	1	1

Transaction ID: C4713401

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

James W. Hackett, Esq.

Mailing Address 70 Elmgrove Avenue

City

Providence

State

RI

Zip Code

02906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nutter & McCleanon

Occupation

Attorney

Receipt For: 2010

☐ Primary ☐ General  
☒ Other (specify) ▼  
 2010 Gen. Debt

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	1	1

Transaction ID: C4713809

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Ryan E Hutchins

Mailing Address 28 Vinton St  
Unit 3

City

Boston

State

MA

Zip Code

02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gilbane

Occupation

District Manager

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	1

Transaction ID: C4755171

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) .....

1750.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

A.

Full Name (Last, First, Middle Initial)

Paul V. Jabour, Esq.

Mailing Address 343 Broadway  
Floor 2

City State Zip Code  
 Providence RI 02909-1142

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Providence Probate CourtOccupation  
Clerk

Receipt For: 2010  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 2010 Gen. Debt

Election Cycle-to-Date ▼  
 250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 1 / 1 5 / 2 0 1 1

Transaction ID: C4713822

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Ellen Jagolinzer

Mailing Address 768 Elmgrove Avenue

City State Zip Code  
 Providence RI 02906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Media Buyer

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 1 / 0 7 / 2 0 1 1

Transaction ID: C4713180

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Kurt Jamiel, JD

Mailing Address 44 Church St

City State Zip Code  
 Warren RI 02885-3123

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jamiel Financial AdvisorsOccupation  
Founder and President

Receipt For: 2010  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 2010 Gen. Debt

Election Cycle-to-Date ▼  
 300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 1 / 1 5 / 2 0 1 1

Transaction ID: C4713808

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional) .....

1050.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

David W. Jolin

Mailing Address 16 Talbot Drive

City

Rehoboth

State

MA

Zip Code

02769

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gilbane

Occupation

Regional Controller

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: C4755169

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Linda P. Jones

Mailing Address 15 Curtis Road

City

Bristol

State

RI

Zip Code

02809

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For: 2010

☐ Primary ☐ General  
☒ Other (specify) ▼  
2010 Gen. Debt

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 5 / 2 0 1 1

Transaction ID: C4713803

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Paul T. Jones, Jr.

Mailing Address 15 Curtis Road

City

Bristol

State

RI

Zip Code

02809

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Paul T. Jones Law Offices

Occupation

Information Requested

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 1 1

Transaction ID: C4754591

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Theodore Kalo

Mailing Address 514 Janneys Lane

City

Alexandria

State

VA

Zip Code

22302

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LMG, Inc

Occupation

Chief Operating Officer

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 4 / 2 0 1 1

Transaction ID: C4746657

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

James Michael Kennedy

Mailing Address 163 Hines Farm Road

City

Cranston

State

RI

Zip Code

02921

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gilbane

Occupation

Builder

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: C4755170

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Steven Kononchik

Mailing Address 836 N. Brooksvale Rd

City

Cheshire

State

CT

Zip Code

06410

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gilbane

Occupation

District Manager

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: C4755167

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Mark J. Krauss

Mailing Address 100 Cavalier Dr

City

East Greenwich

State

RI

Zip Code

02818-1566

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Cord and Webbing  
Co. Inc.

Occupation

Manager

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: C4754946

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Marie J. Langlois

Mailing Address 254 Wayland Ave

City

Providence

State

RI

Zip Code

02906-4543

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Washington Trust Investors

Occupation

Managing Director

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 1 / 2 0 1 1

Transaction ID: C4713400

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Richard M. Lappin

Mailing Address 47 Northgate Road

City

Wellesley

State

MA

Zip Code

02481

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Regency Plaza

Occupation

Real Estate

Receipt For: 2010

☐ Primary ☐ General  
☒ Other (specify) ▼  
2010 Gen. Debt

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 5 / 2 0 1 1

Transaction ID: C4713829

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1250.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 88

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Brooke Lee

Mailing Address 271 Angell St.

City

Providence

State

RI

Zip Code

02906-2101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Eugene Lee, Inc.

Occupation

Set Designer

Receipt For: 2012

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	0	/	2	0	1	1

Transaction ID: C4746643

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Eugene Lee

Mailing Address 271 Angell St.

City

Providence

State

RI

Zip Code

02906-2101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Eugene Lee, Inc.

Occupation

President

Receipt For: 2012

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	0	/	2	0	1	1

Transaction ID: C4746645

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Peter Leon

Mailing Address 2006 Columbia Road NW

City

Washington

State

DC

Zip Code

20009

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dow Lohnes Gov't Strategi-  
es

Occupation

Lobbyist

Receipt For: 2012

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	1	1

Transaction ID: C4751560

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

1250.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Alexander Leventhal

Mailing Address 1 Charles St South  
14D

City State Zip Code  
Boston MA 02116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Faros Properties

Occupation  
Real Estate Investment

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2011

Transaction ID: C4754865

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Michael S. Lorber

Mailing Address 400 East 51st Street Apt.6E

City State Zip Code  
New York NY 10022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Prudential Realty

Occupation  
Executive

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2011

Transaction ID: C4755177

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Suzanne M. Magaziner

Mailing Address P.O. Box 319

City State Zip Code  
Bristol RI 02809

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Consultant

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2011

Transaction ID: C4755092

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Matthew J. Mallow

Mailing Address 1 W 72nd St  
Apt 25

City State Zip Code  
New York NY 10023-3417

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Skadden, Arps, Slate, Mea-  
gher & Flom L

Occupation  
Partner

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 28 / 2011

Transaction ID: C4753848

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Robert A. Manocchia

Mailing Address 350 Forge Road

City State Zip Code  
North Kingstown RI 02852

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gilbane Company

Occupation  
Vice President of Administration

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2011

Transaction ID: C4755168

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Karen Lynn Marangi

Mailing Address 1004 N. Daniel St

City State Zip Code  
Arlington VA 22201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Raben Group

Occupation  
Attorney

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 03 / 2011

Transaction ID: C4751565

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Gary Marinosci

Mailing Address 55 Longmeadow Drive

City

East Greenwich

State

RI

Zip Code

02818

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Liberty Title and Escrow  
Co.

Occupation

Title Closing Attorney

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 1 1

Transaction ID: C4754597

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Thomas McConnell

Mailing Address 5 Strong Place

City

Brooklyn

State

NY

Zip Code

11231

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cushman & Wakefield

Occupation

Consultant

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: C4754968

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Michael P. Mello

Mailing Address 80 Hillcrest Rd

City

Belmont

State

MA

Zip Code

02478-2954

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GTech

Occupation

Senior Director of Government Relations

Receipt For: 2010

☐ Primary ☐ General  
☒ Other (specify) ▼  
2010 Gen. Debt

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 5 / 2 0 1 1

Transaction ID: C4713816

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1550.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 88

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Howard Menaker

Mailing Address 1401 Church Street, NW  
#503City State Zip Code  
Washington DC 20005FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
ConsultantReceipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 1 / 2 0 1 1

Transaction ID: C4749838

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Anthony E. Meyer

Mailing Address 551 Fifth Avenue  
Suite 3100City State Zip Code  
New York NY 10176FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Meyer and Co. LLCOccupation  
Principal & ChairmanReceipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: C4755180

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Robert H. Montecalvo

Mailing Address P.O. Box 40358

City State Zip Code  
Providence RI 02940FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
RetiredReceipt For: 2010  
☐ Primary ☐ General  
☒ Other (specify) ▼  
2010 Gen. Debt

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 5 / 2 0 1 1

Transaction ID: C4713815

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

1750.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Raymond Murphy

Mailing Address 50 Holden St

City

Providence

State

RI

Zip Code

02908-5757

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sullivan & CompanyOccupation  
Accountant

Receipt For: 2010

☐ Primary ☐ General☒ Other (specify) ▼  
2010 Gen. Debt

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 1 1

Transaction ID: C4714350

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Jay A. Neveloff

Mailing Address 1177 Avenue of the Americas

City

New York

State

NY

Zip Code

10036-2714

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KRAMER LEVIN NAFTALIS &  
FRANKELOccupation  
Attorney

Receipt For: 2012

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: C4755179

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Michael A. O'Brien

Mailing Address 72 Rodney Lecours Dr.

City

North Attleboro

State

MA

Zip Code

02760

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GilbaneOccupation  
District Operations Manager

Receipt For: 2012

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: C4755166

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) .....

1250.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Ken Orenstein

Mailing Address 330 Lloyd Ave

City

Providence

State

RI

Zip Code

02906-4212

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

real estate counselor

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	4		2	0	1	1

Transaction ID: C4712893

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Ken Orenstein

Mailing Address 330 Lloyd Ave

City

Providence

State

RI

Zip Code

02906-4212

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

real estate counselor

Receipt For: 2010

☐ Primary ☐ General  
☒ Other (specify) ▼  
 2010 Gen. Debt

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	1	1

Transaction ID: C4713796

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Michael Paese

Mailing Address 1630-B 19th street, NW

City

Washington

State

DC

Zip Code

20009

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Goldman Sachs

Occupation

Managing Director

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	1

Transaction ID: C4754958

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional) .....

1500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Andrew Panteleakis

Mailing Address 646 Bellevue Ave

Miramar Carriage House, Apt 1

City

State

Zip Code

Newport

RI

02840-7309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mirimar

Occupation

Self-employed/Investor

Receipt For: 2012

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 0 4 / 2 0 1 1

Transaction ID: C4712969

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Joseph A. Quattrocchi

Mailing Address 36 Roger Williams Drive

City

State

Zip Code

Greenville

RI

02828

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Douglas Oil Company

Occupation

Business Owner

Receipt For: 2012

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 1 1

Transaction ID: C4754598

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Harriet A. Quinn

Mailing Address 60 Broadway, Apt. 505

City

State

Zip Code

Providence

RI

02903

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State of Rhode Island Superior Court

Occupation

Clerk

Receipt For: 2012

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 1 / 2 0 1 1

Transaction ID: C4713396

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

2250.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 88

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Harriet A. Quinn

Mailing Address 60 Broadway, Apt. 505

City

Providence

State

RI

Zip Code

02903

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State of Rhode Island Sup-  
erior Court

Occupation

Clerk

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	8	/	2	0	1	1

Transaction ID: C4752320

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Marcia S. Riesman

Mailing Address 245 Waterman Street, Suite 402

City

Providence

State

RI

Zip Code

02906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Homemaker

Receipt For: 2010

☐ Primary ☐ General  
☒ Other (specify) ▼  
 2010 Gen. Debt

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	5	/	2	0	1	1

Transaction ID: C4713826

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Clayton Rockefeller

Mailing Address 532 Kinsley Ave  
Unit 501

City

Providence

State

RI

Zip Code

02909-1000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self-employed

Occupation

real estate

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	0	/	2	0	1	1

Transaction ID: C4713143

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

1350.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Anthony Rosciti, Sr.

Mailing Address PO Box 19120

City

Johnston

State

RI

Zip Code

02919

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Parkside Site & Utility

Occupation  
Construction

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 0 / 2 0 1 1

Transaction ID: C4754595

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Angelo S. Rotella

Mailing Address 4 Pond View Center

City

Smithfield

State

RI

Zip Code

02917

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Berkshire Place Nursing  
Home

Occupation  
President

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 0 / 2 0 1 1

Transaction ID: C4754600

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Alan J. Roth

Mailing Address 1845 Vernon Street, NW

City

Washington

State

DC

Zip Code

20009-1216

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US Telecom - The Broadband  
Association

Occupation  
Senior Executive Vice President

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 3 / 2 0 1 1

Transaction ID: C4751549

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Mal A. Salvatore, Esq.

Mailing Address 400 Reservoir Avenue Suite 3C

City

Providence

State

RI

Zip Code

02907-3568

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sondler, Salvatore & DiCristofaro

Occupation  
Attorney

Receipt For: 2010

☐ Primary ☐ General

☒ Other (specify) ▼  
2010 Gen. Debt

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 1 1

Transaction ID: C4714353

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Richard C. Sardella

Mailing Address 35 Wilbur Avenue

City

Newport

State

RI

Zip Code

02840

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sardella's Restaurant

Occupation  
Owner

Receipt For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 1 / 2 0 1 1

Transaction ID: C4713395

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Henry D. Sharpe, Jr.

Mailing Address 30 Pojac Point Road

City

North Kingstown

State

RI

Zip Code

02852

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2010

☐ Primary ☐ General

☒ Other (specify) ▼  
2010 Gen. Debt

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 0 7 / 2 0 1 1

Transaction ID: C4713181

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 88

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Peggy Boyd Sharpe

Mailing Address 30 Pojac Point Road

City

North Kingstown

State

RI

Zip Code

02852

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Homemaker

Receipt For: 2010

☐ Primary ☐ General☒ Other (specify) ▼  
2010 Gen. Debt

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	7		2	0	1	1

Transaction ID: C4713182

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

James Lynn Singleton

Mailing Address 68 Tarklin Road

City

Chepachet

State

RI

Zip Code

02814

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Providence Performing Arts  
Center

Occupation

President

Receipt For: 2010

☐ Primary ☐ General☒ Other (specify) ▼  
2010 Gen. Debt

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	1	1

Transaction ID: C4713812

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Jeff Slavin

Mailing Address 5706 Warwick Place

City

Chevy Chase

State

MD

Zip Code

20815

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Town of Somerset, Chevy  
Chase

Occupation

Mayor

Receipt For: 2012

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	1	1

Transaction ID: C4751553

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) .....

1000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Barry R. Sloane

Mailing Address 5 Spinnaker Dr

City

Barrington

State

RI

Zip Code

02806-2831

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Century Bank

Occupation

Co-President, Co-CEO

Receipt For: 2010

☐ Primary ☐ General

☒ Other (specify) ▼  
2010 Gen. Debt

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 5 / 2 0 1 1

Transaction ID: C4713807

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Candace Sloane

Mailing Address 72 Fairmount St.

City

Brookline

State

MA

Zip Code

02445

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Brown Medical School

Occupation

Information Requested

Receipt For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 1 1

Transaction ID: C4754535

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Jonathan Spencer

Mailing Address 1020 N. Highland Street #905

City

Arlington

State

VA

Zip Code

22201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Verisign, inc

Occupation

Attorney

Receipt For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 0 / 2 0 1 1

Transaction ID: C4746937

Amount of Each Receipt this Period

1500.00

**SUBTOTAL** of Receipts This Page (optional) .....

2750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Donald R. Sweitzer

Mailing Address 250 Major Potter Rd

City

Warwick

State

RI

Zip Code

02886-9547

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GTECH

Occupation  
Chairman

Receipt For: 2010

☐ Primary ☐ General

☒ Other (specify) ▼  
2010 Gen. Debt

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 5 / 2 0 1 1

Transaction ID: C4713800

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Sandra Green Swirski

Mailing Address 1455 Pennsylvania Ave NW  
The Willard

City

Washington

State

DC

Zip Code

20004-1017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Philanthropic Collabo-  
rative

Occupation  
President

Receipt For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 3 / 2 0 1 1

Transaction ID: C4751548

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Joshua Teverow, Esq.

Mailing Address 38 Newton Ave

City

Narragansett

State

RI

Zip Code

02882-1368

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Joshua Teverow, Esq., Ltd.

Occupation  
Attorney

Receipt For: 2010

☐ Primary ☐ General

☒ Other (specify) ▼  
2010 Gen. Debt

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 1 1

Transaction ID: C4714352

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 88

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Patricia Tobin

Mailing Address 13524 Wilt Store Road

City

Leesburg

State

VA

Zip Code

20176

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gonzaga College High Scho-  
olOccupation  
Librarian

Receipt For: 2012

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	1

Transaction ID: C4754991

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Michael Torra

Mailing Address 1700 17th Street NW  
#303

City

Washington

State

DC

Zip Code

20009

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Raben GroupOccupation  
Public Affairs Consultant

Receipt For: 2012

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	3	/	2	0	1	1

Transaction ID: C4746836

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Robert T. Vlasits

Mailing Address 1133 14th St NW #1204

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Weil, Gotshal & Manges LLPOccupation  
Attorney

Receipt For: 2012

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	1	1

Transaction ID: C4754611

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional) .....

2550.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Robert T. Vlasis

Mailing Address 1133 14th St NW #1204

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Weil, Gotshal & Manges LLPOccupation  
Attorney

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	1	1

Transaction ID: C4755515

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Robert T. Vlasis

Mailing Address 1133 14th St NW #1204

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Weil, Gotshal & Manges LLPOccupation  
Attorney

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	1	1

Transaction ID: C4755516

Amount of Each Receipt this Period

1500.00

**C.**

Full Name (Last, First, Middle Initial)

Bruce P. Waterson

Mailing Address 16 High Point Drive

City

North Smithfield

State

RI

Zip Code

02896

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Waterson Terminal Service-  
s, LLCOccupation  
President & Chief Operating Officer

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	1	1

Transaction ID: C4754525

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional) .....

4500.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 88

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

David G. Whalen

Mailing Address 4 Holly Lane

City

Barrington

State

RI

Zip Code

02806

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AT Cross Company

Occupation

President and Chief Executive Officer

Receipt For: 2010

☐ Primary ☐ General☒ Other (specify) ▼  
2010 Gen. Debt

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 5 / 2 0 1 1

Transaction ID: C4713810

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Joseph C Williams

Mailing Address 24 W. 46th St #4

City

New York

State

NY

Zip Code

10036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2012

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: C4755182

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Kenneth F. Zarrilli, Jr.

Mailing Address 208 West 23rd Street

City

New York

State

NY

Zip Code

10011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Newport Trust Company

Occupation

President

Receipt For: 2012

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 3 / 2 0 1 1

Transaction ID: C4749851

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional) .....

3250.00

TOTAL This Period (last page this line number only) .....

82406.15

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 88

(check only one)

<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Democratic Congressional Campaign Cmte

Mailing Address 430 S Capitol St, SE 2nd Fl

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.**C** C00000935

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13.68

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	1	1

Transaction ID: C4751307

Amount of Each Receipt this Period

13.68

\* In-Kind: Fundraising Services

SUBTOTAL of Receipts This Page (optional) .....

13.68

TOTAL This Period (last page this line number only) .....

13.68

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 88

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**Full Name (Last, First, Middle Initial)  
AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTIONMailing Address 777 6th Street, NW  
Suite 200City State Zip Code  
Washington DC 20001FEC ID number of contributing  
federal political committee. **C** C00024521

Name of Employer Occupation

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 3 / 2 0 1 1

Transaction ID: C4751547

Amount of Each Receipt this Period

2500.00

**B.**Full Name (Last, First, Middle Initial)  
AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTSMailing Address Palladian 1  
220 Leigh Farm RdCity State Zip Code  
Durham NC 27707FEC ID number of contributing  
federal political committee. **C** C00077321

Name of Employer Occupation

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 3 / 2 0 1 1

Transaction ID: C4746837

Amount of Each Receipt this Period

1000.00

**C.**Full Name (Last, First, Middle Initial)  
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&TMailing Address 208 S. Akard Street  
Suite 3521City State Zip Code  
Dallas TX 75202FEC ID number of contributing  
federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2010  
☐ Primary ☐ General  
☒ Other (specify) ▼  
2010 Gen. DebtElection Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 0 4 / 2 0 1 1

Transaction ID: C4712968

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional) .....

4500.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 88

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**Full Name (Last, First, Middle Initial)  
BARNES & THORNBURG POLITICAL ACTION COMMITTEEMailing Address 11 South Meridian Street  
Suite 900City State Zip Code  
Indianapolis IN 46204FEC ID number of contributing  
federal political committee. **C** C00395947

Name of Employer

Occupation

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: C4755176

Amount of Each Receipt this Period

1000.00

**B.**Full Name (Last, First, Middle Initial)  
Dealers Election Action Committee of the National

Mailing Address 8400 Westpark Drive

City State Zip Code  
Mc Lean VA 22102FEC ID number of contributing  
federal political committee. **C** C00040998

Name of Employer

Occupation

Receipt For: 2010  
☐ Primary ☐ General  
☒ Other (specify) ▼  
2010 Gen. DebtElection Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 0 4 / 2 0 1 1

Transaction ID: C4712967

Amount of Each Receipt this Period

1000.00

**C.**Full Name (Last, First, Middle Initial)  
JOBS, OPPORTUNITIES AND EDUCATION PAC (JOE-PAC)Mailing Address 84-56 Grand Avenue  
ElmhurstCity State Zip Code  
New York NY 11373FEC ID number of contributing  
federal political committee. **C** C00362384

Name of Employer

Occupation

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: C4757165

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional) .....

3000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 88

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)  
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL A

Mailing Address 1550 CRYSTAL DRIVE  
SUITE 300

City State Zip Code  
ARLINGTON VA 22202

FEC ID number of contributing  
federal political committee.

**C** C00303024

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 1 / 2 0 1 1

Transaction ID: C4751314

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
NATIONAL ORGANIZATION TO RETAIN THE MAJORITY

Mailing Address 603 STEWART STREET #819

City State Zip Code  
SEATTLE WA 98101

FEC ID number of contributing  
federal political committee.

**C** C00450700

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 4 / 2 0 1 1

Transaction ID: C4753357

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
NATIONAL VENTURE CAPITAL ASSOCIATION VENTUREPAC

Mailing Address 1655 N. Fort Myer Dr.  
Suite 850

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing  
federal political committee.

**C** C00150367

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 1 / 2 0 1 1

Transaction ID: C4749846

Amount of Each Receipt this Period

1500.00

**SUBTOTAL** of Receipts This Page (optional) .....

3500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 88

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

NEA FUND FOR CHILDREN AND PUBLIC EDUCATION

Mailing Address 1201 16th Street NW Ste 420

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.**C**

C00003251

Name of Employer

Occupation

Receipt For: 2010

☐ Primary ☐ General☒ Other (specify) ▼  
2010 Gen. Debt

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	4	/	2	0	1	1

Transaction ID: C4712972

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

RAYTHEON COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1100 Wilson Blvd  
Suite 1500

City

Arlington

State

VA

Zip Code

22209

FEC ID number of contributing  
federal political committee.**C**

C00097568

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

12321.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	4	/	2	0	1	1

Transaction ID: C4750062

Amount of Each Receipt this Period

5000.00

\* In-Kind: Suite Rental

**C.**

Full Name (Last, First, Middle Initial)

RAYTHEON COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1100 Wilson Blvd  
Suite 1500

City

Arlington

State

VA

Zip Code

22209

FEC ID number of contributing  
federal political committee.**C**

C00097568

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

12321.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	4	/	2	0	1	1

Transaction ID: C4750063

Amount of Each Receipt this Period

2500.00

\* In-Kind: Suite Rental

**SUBTOTAL** of Receipts This Page (optional) .....

12500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 88

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**Full Name (Last, First, Middle Initial)  
RAYTHEON COMPANY POLITICAL ACTION COMMITTEEMailing Address 1100 Wilson Blvd  
Suite 1500City State Zip Code  
Arlington VA 22209FEC ID number of contributing  
federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
12321.27

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 4 / 2 0 1 1

Transaction ID: C4750064

Amount of Each Receipt this Period

2321.27

\* In-Kind: Event Catering

**B.**Full Name (Last, First, Middle Initial)  
RHODE ISLAND HOPE PACMailing Address 607 14th Street, NW  
Suite 800City State Zip Code  
Washington DC 20005FEC ID number of contributing  
federal political committee. **C** C00431601

Name of Employer Occupation

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: C4757163

Amount of Each Receipt this Period

5000.00

**C.**Full Name (Last, First, Middle Initial)  
THE BOEING COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1200 WILSON BLVD

City State Zip Code  
ARLINGTON VA 22209FEC ID number of contributing  
federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 8 / 2 0 1 1

Transaction ID: C4752321

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional) ▶

8321.27

TOTAL This Period (last page this line number only) ▶

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 88

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

THE GOLDMAN SACHS GROUP, INC. POLITICAL ACTION COM

Mailing Address 101 CONSTITUTION AVENUE, NW  
SUITE 1000E

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing  
federal political committee.

**C** C00350744

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 1 1

Transaction ID: C4754554

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

UNITED PARCEL SERVICE INC. PAC

Mailing Address 55 GLENLAKE PARKWAY NE

City State Zip Code  
ATLANTA GA 30328

FEC ID number of contributing  
federal political committee.

**C** C00064766

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 8 / 2 0 1 1

Transaction ID: C4752318

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

5500.00

**TOTAL** This Period (last page this line number only) .....

37321.27

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 88

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)

Abar Hutton

Mailing Address 6190 Grovdale Crt, Suite 200

City State Zip Code

Alexandria

VA

22310

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2010

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

12915.43

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 0 / 2 0 1 1

Transaction ID: C4714351

Amount of Each Receipt this Period

12915.43

**B.**

Full Name (Last, First, Middle Initial)

Verizon Wireless

Mailing Address 12677 Acosta Boulevard

City State Zip Code

San Ramon

CA

94583

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

354.55

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 1 / 2 0 1 1

Transaction ID: C4749837

Amount of Each Receipt this Period

19.35

**C.**

Full Name (Last, First, Middle Initial)

Verizon Wireless

Mailing Address 12677 Acosta Boulevard

City State Zip Code

San Ramon

CA

94583

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

354.55

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 1 / 2 0 1 1

Transaction ID: C4751313

Amount of Each Receipt this Period

335.20

**SUBTOTAL** of Receipts This Page (optional) .....

13269.98

**TOTAL** This Period (last page this line number only) .....

13269.98

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Cicilline Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Andrew J. Annaldo	<b>Transaction ID:</b> D297381
Mailing Address 2 Beloit Street	Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 8 / 2 0 1 1</div> </div>
City Providence State RI Zip Code 02908	Amount of Each Disbursement this Period
Purpose of Disbursement Fundraising Expense: Catering Candidate Name <div>Category/Type</div>	<div>658.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	* In-Kind Received
<b>B.</b> Full Name (Last, First, Middle Initial) AT & T Mobility	<b>Transaction ID:</b> D297221
Mailing Address PO Box 536216	Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 7 / 2 0 1 1</div> </div>
City Atlanta State GA Zip Code 30353	Amount of Each Disbursement this Period
Purpose of Disbursement Mobile Phone Candidate Name <div>Category/Type</div>	<div>132.28</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
<b>C.</b> Full Name (Last, First, Middle Initial) AT & T Mobility	<b>Transaction ID:</b> D296336
Mailing Address PO Box 536216	Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 3 / 2 0 1 1</div> </div>
City Atlanta State GA Zip Code 30353	Amount of Each Disbursement this Period
Purpose of Disbursement Mobile Phone Candidate Name <div>Category/Type</div>	<div>134.80</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

**SUBTOTAL** of Disbursements This Page (optional) .....

**925.08**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)  
AT & T Mobility

Mailing Address PO Box 536216

City Atlanta State GA Zip Code 30353

Purpose of Disbursement  
Mobile Phone  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012 ☒ Primary ☐ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: D297634  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

142.91

**B.**

Full Name (Last, First, Middle Initial)  
Campaign Finance Officers

Mailing Address 102 Waterman Street Suite 2

City Providence State RI Zip Code 02906

Purpose of Disbursement  
Accounting & Compliance  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012 ☒ Primary ☐ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: D297651  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

8000.00

**C.**

Full Name (Last, First, Middle Initial)  
Campaign Finance Officers

Mailing Address 102 Waterman Street Suite 2

City Providence State RI Zip Code 02906

Purpose of Disbursement  
Accounting & Compliance  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2012 ☒ Primary ☐ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: D297652  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

9142.91

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Cicilline Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Citizens Bank	<b>Transaction ID:</b> D297635 <b>Date of Disbursement</b>
Mailing Address 1 Citizens Plaza	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 1 / 2 0 1 1</div> </div>
City Providence State RI Zip Code 02903	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Bank Service Charges	<div>50.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Citizens Bank	<b>Transaction ID:</b> D297636 <b>Date of Disbursement</b>
Mailing Address 1 Citizens Plaza	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 1 / 2 0 1 1</div> </div>
City Providence State RI Zip Code 02903	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Bank Service Charges	<div>50.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Citizens Bank	<b>Transaction ID:</b> D296358 <b>Date of Disbursement</b>
Mailing Address 1 Citizens Plaza	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 3 1 / 2 0 1 1</div> </div>
City Providence State RI Zip Code 02903	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Bank Service Charges	<div>50.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Cicilline Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Citizens Bank	<b>Transaction ID:</b> D296359 <b>Date of Disbursement</b>
Mailing Address 1 Citizens Plaza	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 3 1 / 2 0 1 1</div> </div>
City Providence State RI Zip Code 02903	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Bank Service Charges	<div>50.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Citizens Bank	<b>Transaction ID:</b> D296360 <b>Date of Disbursement</b>
Mailing Address 1 Citizens Plaza	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 3 1 / 2 0 1 1</div> </div>
City Providence State RI Zip Code 02903	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Bank Service Charges	<div>50.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Citizens Bank	<b>Transaction ID:</b> D297231 <b>Date of Disbursement</b>
Mailing Address 1 Citizens Plaza	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 1 1</div> </div>
City Providence State RI Zip Code 02903	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Bank Service Charges	<div>50.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Cicilline Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Citizens Bank	<b>Transaction ID:</b> D297233 <b>Date of Disbursement</b>
Mailing Address 1 Citizens Plaza	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 1 1</div> </div>
City Providence State RI Zip Code 02903	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Bank Service Charges	<div>50.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Citizens Bank	<b>Transaction ID:</b> D297613 <b>Date of Disbursement</b>
Mailing Address 1 Citizens Plaza	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div>
City Providence State RI Zip Code 02903	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Bank Service Charges	<div>6.99</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Cogens Printing Services	<b>Transaction ID:</b> D297229 <b>Date of Disbursement</b>
Mailing Address 1 Virginia Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 2 / 2 0 1 1</div> </div>
City Providence State RI Zip Code 02905	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Printing (Fundraising)	<div>492.20</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**549.19**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Cicilline Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Cogens Printing Services	<b>Transaction ID:</b> D297624 <b>Date of Disbursement</b>
Mailing Address 1 Virginia Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div>
City Providence State RI Zip Code 02905	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Printing (Gen. Camp. Exp.)	<div>995.10</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Cogens Printing Services	<b>Transaction ID:</b> D297625 <b>Date of Disbursement</b>
Mailing Address 1 Virginia Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div>
City Providence State RI Zip Code 02905	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Printing (Gen. Camp. Exp.)	<div>850.65</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Cogens Printing Services	<b>Transaction ID:</b> D297629 <b>Date of Disbursement</b>
Mailing Address 1 Virginia Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 5 / 2 0 1 1</div> </div>
City Providence State RI Zip Code 02905	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Printing (Gen. Camp. Exp.)	<div>704.85</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

2550.60

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Cicilline Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Digital Turf	<b>Transaction ID:</b> D297620 <b>Date of Disbursement</b>
Mailing Address 27 Clear Brook Crossing	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div>
City Kennebunk State ME Zip Code 04043	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Web Expenses	<div> <div></div> <div>450.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Dorrance Engraving	<b>Transaction ID:</b> D296342 <b>Date of Disbursement</b>
Mailing Address 635 Prospect St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 3 / 2 0 1 1</div> </div>
City Pawtucket State RI Zip Code 02860	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Printing (Gen. Camp. Exp.)	<div> <div></div> <div>1033.07</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Flood Auto Group	<b>Transaction ID:</b> D296344 <b>Date of Disbursement</b>
Mailing Address 2545 South County Trail	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 8 / 2 0 1 1</div> </div>
City East Greenwich State RI Zip Code 02818	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Auto Lease	<div> <div></div> <div>4000.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**5483.07**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Cicilline Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Ford Credit Mailing Address P.O Box 94380	<b>Transaction ID:</b> D297621 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div>
City Palatine State IL Zip Code 60094-4380 Purpose of Disbursement Auto Lease Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>504.08</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Ford Credit Mailing Address P.O Box 94380 City Palatine State IL Zip Code 60094-4380 Purpose of Disbursement Auto Lease Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D297213 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 2 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>476.83</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Gasbarro Liquors Mailing Address 98 Highland Ave City Seekonk State MA Zip Code 02771-5806 Purpose of Disbursement Fundraising: Food and Beverages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D297701 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 1 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1904.00</div>
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<div>2884.91</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Cicilline Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Justin Gray	<b>Transaction ID:</b> D299082		
Mailing Address	Date of Disbursement		
300 New Jersey Ave, NW, Suite 650	<div> <div> <div>M</div> <div>M</div> </div> <div>/</div> <div> <div>D</div> <div>D</div> </div> <div>/</div> <div> <div>Y</div> <div>Y</div> <div>Y</div> <div>Y</div> </div> </div> <div> <div>0</div> <div>2</div> </div> <div> <div>1</div> <div>7</div> </div> <div> <div>2</div> <div>0</div> <div>1</div> <div>1</div> </div>		
City Washington	State DC	Zip Code 20001	Amount of Each Disbursement this Period
Purpose of Disbursement	<div> <div></div> <div>Category/ Type</div> </div>		<div>224.07</div>
Event Catering	Candidate Name		* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
<b>B.</b> Full Name (Last, First, Middle Initial) Hon William Gray	<b>Transaction ID:</b> D299083		
Mailing Address	Date of Disbursement		
2730 Cardena St	<div> <div> <div>M</div> <div>M</div> </div> <div>/</div> <div> <div>D</div> <div>D</div> </div> <div>/</div> <div> <div>Y</div> <div>Y</div> <div>Y</div> <div>Y</div> </div> </div> <div> <div>0</div> <div>2</div> </div> <div> <div>1</div> <div>7</div> </div> <div> <div>2</div> <div>0</div> <div>1</div> <div>1</div> </div>		
City Miami	State FL	Zip Code 33134	Amount of Each Disbursement this Period
Purpose of Disbursement	<div> <div></div> <div>Category/ Type</div> </div>		<div>224.08</div>
Event Catering	Candidate Name		* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
<b>C.</b> Full Name (Last, First, Middle Initial) Grunwald Communications	<b>Transaction ID:</b> D296354		
Mailing Address	Date of Disbursement		
1306 30th St, NW	<div> <div> <div>M</div> <div>M</div> </div> <div>/</div> <div> <div>D</div> <div>D</div> </div> <div>/</div> <div> <div>Y</div> <div>Y</div> <div>Y</div> <div>Y</div> </div> </div> <div> <div>0</div> <div>1</div> </div> <div> <div>2</div> <div>4</div> </div> <div> <div>2</div> <div>0</div> <div>1</div> <div>1</div> </div>		
City Washington	State DC	Zip Code 20007	Amount of Each Disbursement this Period
Purpose of Disbursement	<div> <div></div> <div>Category/ Type</div> </div>		<div>12302.00</div>
Production (Media)	Candidate Name		* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

**SUBTOTAL** of Disbursements This Page (optional) .....

**12750.15**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Cicilline Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Eric Hyers	<b>Transaction ID:</b> D296333 <b>Date of Disbursement</b>
Mailing Address 551 Fruit Hill Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 3 / 2 0 1 1</div> </div>
City North Providence State RI Zip Code 02911	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Compensation Bonus Candidate Name <div>Category/Type</div>	<div>5000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
<b>B.</b> Full Name (Last, First, Middle Initial) Eric Hyers	<b>Transaction ID:</b> D297220 <b>Date of Disbursement</b>
Mailing Address 551 Fruit Hill Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 7 / 2 0 1 1</div> </div>
City North Providence State RI Zip Code 02911	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Compensation Bonus Candidate Name <div>Category/Type</div>	<div>3000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
<b>C.</b> Full Name (Last, First, Middle Initial) Eric Hyers	<b>Transaction ID:</b> D297617 <b>Date of Disbursement</b>
Mailing Address 551 Fruit Hill Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div>
City North Providence State RI Zip Code 02911	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Compensation Bonus Candidate Name <div>Category/Type</div>	<div>4000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

**SUBTOTAL** of Disbursements This Page (optional) .....

**12000.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Cicilline Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Eric Hyers Mailing Address 551 Fruit Hill Ave	<b>Transaction ID:</b> D297633 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 6 / 2 0 1 1</div> </div>
City North Providence State RI Zip Code 02911 Purpose of Disbursement Compensation Bonus Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>3000.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Internal Revenue Service Mailing Address Department of the Treasury City Cincinnati State OH Zip Code 45999 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D296348 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1337.46</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Just Ellen's Inc. Mailing Address 125 Providence St City West Warwick State RI Zip Code 02893 Purpose of Disbursement Events (Field) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D296355 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>4610.63</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**8948.09**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)  
Cicilline Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Just Ellen's Inc.	<b>Transaction ID:</b> D296341 <b>Date of Disbursement</b>
Mailing Address 125 Providence St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 3 / 2 0 1 1</div> </div>
City West Warwick State RI Zip Code 02893	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Events (Field)	<div>1922.40</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Merchant Services	<b>Transaction ID:</b> D296325 <b>Date of Disbursement</b>
Mailing Address PO Box 6600	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 3 / 2 0 1 1</div> </div>
City Hagerstown State MD Zip Code 21740	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Bank Service Charges	<div>5.90</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Merchant Services	<b>Transaction ID:</b> D296326 <b>Date of Disbursement</b>
Mailing Address PO Box 6600	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 3 / 2 0 1 1</div> </div>
City Hagerstown State MD Zip Code 21740	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Bank Service Charges	<div>25.86</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

1954.16

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
Cicilline Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Merchant Services Mailing Address PO Box 6600	<b>Transaction ID:</b> D296327 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 3 / 2 0 1 1</div> </div>
City Hagerstown State MD Zip Code 21740 Purpose of Disbursement Bank Service Charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>66.82</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Merchant Services Mailing Address PO Box 6600 City Hagerstown State MD Zip Code 21740 Purpose of Disbursement Bank Service Charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D297614 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1.20</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Merchant Services Mailing Address PO Box 6600 City Hagerstown State MD Zip Code 21740 Purpose of Disbursement Bank Service Charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D297615 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>25.45</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**93.47**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
Cicilline Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Merchant Services</p> <p>Mailing Address PO Box 6600</p> <p>City Hagerstown State MD Zip Code 21740</p> <p>Purpose of Disbursement Bank Service Charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D297616  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 3 / 2 0 1 1</div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>113.63</div> </p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Merchant Services</p> <p>Mailing Address PO Box 6600</p> <p>City Hagerstown State MD Zip Code 21740</p> <p>Purpose of Disbursement Bank Service Charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D297215  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 3 / 2 0 1 1</div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>1.60</div> </p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Merchant Services</p> <p>Mailing Address PO Box 6600</p> <p>City Hagerstown State MD Zip Code 21740</p> <p>Purpose of Disbursement Bank Service Charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D297216  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 3 / 2 0 1 1</div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>22.85</div> </p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**138.08**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
Cicilline Committee

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Merchant Services</b> Mailing Address PO Box 6600	<b>Transaction ID:</b> D297217 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 3 / 2 0 1 1</div> </div>
City Hagerstown State MD Zip Code 21740 Purpose of Disbursement Bank Service Charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>34.34</div>
<b>B.</b> Full Name (Last, First, Middle Initial) <b>NGP Software</b> Mailing Address 1225 Eye St NW, Suite 1225 City Washington State DC Zip Code 20005 Purpose of Disbursement Database Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D297230 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 2 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>3450.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) <b>NGP Software</b> Mailing Address 1225 Eye St NW, Suite 1225 City Washington State DC Zip Code 20005 Purpose of Disbursement Database Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D296350 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 4 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b> <div>600.00</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**4084.34**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)  
Options

Mailing Address P.O Box 6406

City State Zip Code  
Providence RI 02940

Purpose of Disbursement  
Print Buys

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D297222

Date of Disbursement

/   /

Amount of Each Disbursement this Period

297.00

**B.**

Full Name (Last, First, Middle Initial)  
Perkins Coie

Mailing Address 1201 Third Ave, 40th Fl

City State Zip Code  
Seattle WA 98101

Purpose of Disbursement  
Legal Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D296335

Date of Disbursement

/   /

Amount of Each Disbursement this Period

180.00

**C.**

Full Name (Last, First, Middle Initial)  
Providence Newspaper Guild

Mailing Address 270 Westminster St 2nd floor

City State Zip Code  
Providence RI 02903

Purpose of Disbursement  
Event Tickets

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D296357

Date of Disbursement

/   /

Amount of Each Disbursement this Period

600.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1077.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Cicilline Committee

**A.**

Full Name (Last, First, Middle Initial)  
Providence Newspaper Guild

Mailing Address 270 Westminster St 2nd floor

City State Zip Code  
Providence RI 02903

Purpose of Disbursement  
Print Buys

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D297219

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
QuickBooks Payroll Service

Mailing Address PO Box 30005

City State Zip Code  
Reno NV 89520

Purpose of Disbursement  
Payroll Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D296328

Date of Disbursement

/   /

Amount of Each Disbursement this Period

95.25

**C.**

Full Name (Last, First, Middle Initial)  
RAYTHEON COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1100 Wilson Blvd  
Suite 1500

City State Zip Code  
Arlington VA 22209

Purpose of Disbursement  
Suite Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D296248

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

\* In-Kind Received

**SUBTOTAL** of Disbursements This Page (optional) .....

5295.25

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Cicilline Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) RAYTHEON COMPANY POLITICAL ACTION COMMITTEE</p> <p>Mailing Address 1100 Wilson Blvd Suite 1500</p> <p>City Arlington State VA Zip Code 22209</p> <p>Purpose of Disbursement Suite Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼            State: District:</p>	<p><b>Transaction ID:</b> D296249  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 4 / 2 0 1 1</div></p> <p>Amount of Each Disbursement this Period  <div>2500.00</div></p> <p>* In-Kind Received</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) RAYTHEON COMPANY POLITICAL ACTION COMMITTEE</p> <p>Mailing Address 1100 Wilson Blvd Suite 1500</p> <p>City Arlington State VA Zip Code 22209</p> <p>Purpose of Disbursement Event Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼            State: District:</p>	<p><b>Transaction ID:</b> D296250  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 4 / 2 0 1 1</div></p> <p>Amount of Each Disbursement this Period  <div>2321.27</div></p> <p>* In-Kind Received</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Rolla Group LLC</p> <p>Mailing Address Jeff Larivee 2201 2nd St NW, #44</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Consultant Exp. (Fundraising)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼            State: District:</p>	<p><b>Transaction ID:</b> D296356  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 4 / 2 0 1 1</div></p> <p>Amount of Each Disbursement this Period  <div>3500.00</div></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**8321.27**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Cicilline Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Rolla Group LLC	<b>Transaction ID:</b> D297627 <b>Date of Disbursement</b>
Mailing Address Jeff Larivee 2201 2nd St NW, #44	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div>
City Washington State DC Zip Code 20001	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Consultant Exp. (Fundraising)	<div>3500.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Sheahan Printing	<b>Transaction ID:</b> D297626 <b>Date of Disbursement</b>
Mailing Address 1 Front St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 7 / 2 0 1 1</div> </div>
City Woonsocket State RI Zip Code 02895	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Printing (Gen. Camp. Exp.)	<div>1144.90</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) USPS	<b>Transaction ID:</b> D296322 <b>Date of Disbursement</b>
Mailing Address 100 Hartford Avenue	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 1 / 2 0 1 1</div> </div>
City Providence State RI Zip Code 02903	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Postage (Fundraising)	<div>220.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**4864.90**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Cicilline Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon Wireless	<b>Transaction ID:</b> D296340 <b>Date of Disbursement</b>
Mailing Address 12677 Acosta Boulevard	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 3 / 2 0 1 1</div> </div>
City San Ramon State CA Zip Code 94583	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Mobile Phone Candidate Name	<div> <div>60.07</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Verizon Wireless	<b>Transaction ID:</b> D296345 <b>Date of Disbursement</b>
Mailing Address 12677 Acosta Boulevard	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 4 / 2 0 1 1</div> </div>
City San Ramon State CA Zip Code 94583	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Mobile Phone Candidate Name	<div> <div>906.28</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Verizon	<b>Transaction ID:</b> D296334 <b>Date of Disbursement</b>
Mailing Address PO Box 1100	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 3 / 2 0 1 1</div> </div>
City Albany State NY Zip Code 12250-0001	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Office Phones Candidate Name	<div> <div>126.89</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

**1093.24**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)  
Cicilline Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon	<b>Transaction ID:</b> D296338 <b>Date of Disbursement</b>
Mailing Address PO Box 1100	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 3 / 2 0 1 1</div> </div>
City Albany State NY Zip Code 12250-0001	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Office Phones	<div> <div></div> <div>106.26</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Verizon	<b>Transaction ID:</b> D297630 <b>Date of Disbursement</b>
Mailing Address PO Box 1100	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 5 / 2 0 1 1</div> </div>
City Albany State NY Zip Code 12250-0001	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Office Phones	<div> <div></div> <div>68.34</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Berge A. Zobian	<b>Transaction ID:</b> D296324 <b>Date of Disbursement</b>
Mailing Address 17 Amherst St.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 3 / 2 0 1 1</div> </div>
City Providence State RI Zip Code 02909	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Photography	<div> <div></div> <div>500.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**674.60**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Cicilline Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) American Express	<b>Transaction ID:</b> D296331 Date of Disbursement																				
	Mailing Address 2965 West Corporate Lakes Blvd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	3		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		1	3		2	0	1	1													
	City State Zip Code Fort Lauderdale FL 33331	Amount of Each Disbursement this Period																				
	Purpose of Disbursement Credit card- below if itemized	<table border="1"> <tr> <td colspan="10">1932.00</td> </tr> </table>	1932.00																			
1932.00																						
	Candidate Name	Category/ Type																				
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
	State: District:																					
<b>B.</b>	Full Name (Last, First, Middle Initial) US Airways	<b>Transaction ID:</b> D296395 Date of Disbursement																				
	Mailing Address 111 W Rio Salado Pkwy	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	3		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		1	3		2	0	1	1													
	City State Zip Code Tempe AZ 85281-2880	Amount of Each Disbursement this Period																				
	Purpose of Disbursement Candidate Travel	<table border="1"> <tr> <td colspan="10">1211.40</td> </tr> </table>	1211.40																			
1211.40																						
	Candidate Name	Category/ Type																				
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]																				
	State: District:																					
<b>C.</b>	Full Name (Last, First, Middle Initial) US Airways	<b>Transaction ID:</b> D296396 Date of Disbursement																				
	Mailing Address 111 W Rio Salado Pkwy	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	3		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		1	3		2	0	1	1													
	City State Zip Code Tempe AZ 85281-2880	Amount of Each Disbursement this Period																				
	Purpose of Disbursement Candidate Travel	<table border="1"> <tr> <td colspan="10">431.40</td> </tr> </table>	431.40																			
431.40																						
	Candidate Name	Category/ Type																				
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]																				
	State: District:																					

SUBTOTAL of Disbursements This Page (optional) .....

1932.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Cicilline Committee

<b>A.</b> Full Name (Last, First, Middle Initial) American Express	<b>Transaction ID:</b> D296332 <b>Date of Disbursement</b>
Mailing Address 2965 West Corporate Lakes Blvd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 3 / 2 0 1 1</div> </div>
City State Zip Code Fort Lauderdale FL 33331	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Credit card- below if itemized	<div>2746.75</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Broadhurst Theater	<b>Transaction ID:</b> D296393 <b>Date of Disbursement</b>
Mailing Address 235 W 44th St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 3 / 2 0 1 1</div> </div>
City State Zip Code New York NY 10036-3907	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Fundraising Expenses	<div>283.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) US Airways	<b>Transaction ID:</b> D296390 <b>Date of Disbursement</b>
Mailing Address 111 W Rio Salado Pkwy	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 3 / 2 0 1 1</div> </div>
City State Zip Code Tempe AZ 85281-2880	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Candidate Travel	<div>163.40</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

2746.75

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Cicilline Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) US Airways</p> <p>Mailing Address 111 W Rio Salado Pkwy</p> <p>City Tempe State AZ Zip Code 85281-2880</p> <p>Purpose of Disbursement Candidate Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D296391  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 3 / 2 0 1 1</div></p> <p>Amount of Each Disbursement this Period  <div>1217.40</div></p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) US Airways</p> <p>Mailing Address 111 W Rio Salado Pkwy</p> <p>City Tempe State AZ Zip Code 85281-2880</p> <p>Purpose of Disbursement Candidate Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D296392  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 3 / 2 0 1 1</div></p> <p>Amount of Each Disbursement this Period  <div>150.00</div></p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Karen Watts</p> <p>Mailing Address 13 Messenger Street Apt. #3F</p> <p>City Providence State RI Zip Code 02903</p> <p>Purpose of Disbursement Reimbursement- below if itemized</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D296352  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 4 / 2 0 1 1</div></p> <p>Amount of Each Disbursement this Period  <div>234.37</div></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**234.37**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Cicilline Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Staples Mailing Address 551 N Main St	<b>Transaction ID:</b> D296382 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 4 / 2 0 1 1</div> </div>
City Providence State RI Zip Code 02904 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>37.44</div> <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Campaign Finance Officers Mailing Address 102 Waterman Street Suite 2	<b>Transaction ID:</b> D296353 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 4 / 2 0 1 1</div> </div>
City Providence State RI Zip Code 02906 Purpose of Disbursement Reimbursement- below if itemized Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>1532.96</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Allegra Printing Mailing Address 102 Waterman Street	<b>Transaction ID:</b> D296387 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 4 / 2 0 1 1</div> </div>
City Providence State RI Zip Code 02906 Purpose of Disbursement Printing (Fundraising) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>97.74</div> <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

1532.96

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Cicilline Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Amtrak	<b>Transaction ID:</b> D296385 <b>Date of Disbursement</b>
Mailing Address 50 Massachusetts Ave NE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 4 / 2 0 1 1</div> </div>
City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
Purpose of Disbursement Candidate Travel	<div>240.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<p>[MEMO ITEM]</p>	
<b>B.</b> Full Name (Last, First, Middle Initial) Delta Airlines	<b>Transaction ID:</b> D296388 <b>Date of Disbursement</b>
Mailing Address PO Box 20706	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 4 / 2 0 1 1</div> </div>
City Atlanta State GA Zip Code 30320-6001	Amount of Each Disbursement this Period
Purpose of Disbursement Staff Travel	<div>343.40</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<p>[MEMO ITEM]</p>	
<b>C.</b> Full Name (Last, First, Middle Initial) USPS	<b>Transaction ID:</b> D296384 <b>Date of Disbursement</b>
Mailing Address 100 Hartford Avenue	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 4 / 2 0 1 1</div> </div>
City Providence State RI Zip Code 02903	Amount of Each Disbursement this Period
Purpose of Disbursement Postage (Fundraising)	<div>792.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<p>[MEMO ITEM]</p>	

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Cicilline Committee

<b>A.</b> Full Name (Last, First, Middle Initial) American Express	<b>Transaction ID:</b> D297214 <b>Date of Disbursement</b>
Mailing Address 2965 West Corporate Lakes Blvd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 2 / 2 0 1 1</div> </div>
City State Zip Code Fort Lauderdale FL 33331	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Credit card - see itemized memos below Candidate Name	<div>2091.65</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div>Category/Type</div> <div>Disbursement For: 2010  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </div>
<b>B.</b> Full Name (Last, First, Middle Initial) AirTran	<b>Transaction ID:</b> D297236 <b>Date of Disbursement</b>
Mailing Address 9955 Airtran Blvd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 2 / 2 0 1 1</div> </div>
City State Zip Code Orlando FL 32827-5330	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Candidate Travel Candidate Name	<div>299.40</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div>Category/Type</div> <div>Disbursement For: 2012  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </div>
<b>C.</b> Full Name (Last, First, Middle Initial) Apple Inc	<b>Transaction ID:</b> D297239 <b>Date of Disbursement</b>
Mailing Address 1 Infinite Loop	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 2 / 2 0 1 1</div> </div>
City State Zip Code Cupertino CA 95014	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Office Equipment Candidate Name	<div>210.94</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div>Category/Type</div> <div>Disbursement For: 2012  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </div>

[MEMO ITEM]

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

2091.65

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Cicilline Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Legal Seafoods</p> <p>Mailing Address 704 7th Street Northwest</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D297234</p> <p>Date of Disbursement 02 / 02 / 2011</p> <p>Amount of Each Disbursement this Period 223.49</p> <p>[MEMO ITEM]</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Shell Oil Providence</p> <p>Mailing Address 691 North Main Street</p> <p>City Providence State RI Zip Code 02904</p> <p>Purpose of Disbursement Travel: Gas</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D297238</p> <p>Date of Disbursement 02 / 02 / 2011</p> <p>Amount of Each Disbursement this Period 130.96</p> <p>[MEMO ITEM]</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Southwest Airlines</p> <p>Mailing Address 1 Aviation Cir</p> <p>City Washington State DC Zip Code 20001-6000</p> <p>Purpose of Disbursement Candidate Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D297237</p> <p>Date of Disbursement 02 / 02 / 2011</p> <p>Amount of Each Disbursement this Period 389.10</p> <p>[MEMO ITEM]</p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ► 0.00</p>	
<p><b>TOTAL</b> This Period (last page this line number only) ..... ►</p>	

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Cicilline Committee

A.

Full Name (Last, First, Middle Initial)  
U-Haul

Mailing Address 740 N Broadway

City State Zip Code  
East Providence RI 02914

Purpose of Disbursement  
Moving Expenses

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Transaction ID: D297235

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	2		2	0	1	1

Amount of Each Disbursement this Period

619.76

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

91668.04

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Cicilline Committee

A.

Full Name (Last, First, Middle Initial)  
Crossroads Rhode Island

Mailing Address 160 Broad Street

City State Zip Code  
Providence RI 02903

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D299484

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	1

Amount of Each Disbursement this Period

3400.00

SUBTOTAL of Disbursements This Page (optional) .....

3400.00

TOTAL This Period (last page this line number only) .....

3400.00

**SCHEDULE C (FEC Form 3)**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13bNAME OF COMMITTEE (In Full)  
Cicilline Committee

Transaction ID: L426

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Hon. David N. Cicilline, PERS FUNDS - [PERSON-  
AL FUNDS]

Election:

☐ Primary  
☒ General  
☐ Other (specify) ▼

Mailing Address 702 Elmgrove Ave

City Providence State RI ZIP Code 02906-4900

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
70000.00	0.00	70000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
1 1D D  
0 1Y Y Y Y  
2 0 1 0

12/31/2012

3.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

70000.00

**TOTALS** This Period (last page in this line only) ▶

70000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 86 / 88

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Cicilline Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Campaign Finance OfficersNature of Debt (Purpose):  
Fundraising Consulting

Mailing Address 102 Waterman Street Suite 2

City State ZIP Code  
Providence RI 02906

Outstanding Balance Beginning This Period

8000.00

Transaction ID: D287650

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8000.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Campaign Finance OfficersNature of Debt (Purpose):  
Accounting & Compliance

Mailing Address 102 Waterman Street Suite 2

City State ZIP Code  
Providence RI 02906

Outstanding Balance Beginning This Period

1000.00

Transaction ID: D287653

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Campaign Finance OfficersNature of Debt (Purpose):  
Bonus Compensation

Mailing Address 102 Waterman Street Suite 2

City State ZIP Code  
Providence RI 02906

Outstanding Balance Beginning This Period

10000.00

Transaction ID: D287655

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

**1) SUBTOTALS** This Period This Page (optional).....

19000.00

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 87 / 88

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Cicilline Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Campaign Finance OfficersNature of Debt (Purpose):  
Fundraising Consulting

Mailing Address 102 Waterman Street Suite 2

City State ZIP Code  
Providence RI 02906

Outstanding Balance Beginning This Period

8000.00

Transaction ID: D293341

Amount Incurred This Period

0.00

Payment This Period

8000.00

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Campaign Finance OfficersNature of Debt (Purpose):  
Accounting & Compliance

Mailing Address 102 Waterman Street Suite 2

City State ZIP Code  
Providence RI 02906

Outstanding Balance Beginning This Period

1000.00

Transaction ID: D293342

Amount Incurred This Period

0.00

Payment This Period

1000.00

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Eric HyersNature of Debt (Purpose):  
Bonus Compensation

Mailing Address 551 Fruit Hill Ave

City State ZIP Code  
North Providence RI 02911

Outstanding Balance Beginning This Period

15000.00

Transaction ID: D287649

Amount Incurred This Period

0.00

Payment This Period

15000.00

Outstanding Balance at Close of This Period

0.00

**1) SUBTOTALS** This Period This Page (optional).....

0.00

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 88 / 88

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Cicilline Committee**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Rolla Group LLCNature of Debt (Purpose):  
Fundraising Consulting

Mailing Address Jeff Larivee 2201 2nd St NW, #44

City State ZIP Code  
Washington DC 20001

Outstanding Balance Beginning This Period

3500.00

Transaction ID: D293339

Amount Incurred This Period

0.00

Payment This Period

3500.00

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Rolla Group LLCNature of Debt (Purpose):  
Fundraising Consulting

Mailing Address Jeff Larivee 2201 2nd St NW, #44

City State ZIP Code  
Washington DC 20001

Outstanding Balance Beginning This Period

3500.00

Transaction ID: D293340

Amount Incurred This Period

0.00

Payment This Period

3500.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

0.00

2) **TOTALS** This Period (last page this line number only).....

19000.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

70000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

89000.00